2092 Name (pri	CAMPAIGN CONTRIBUTIONS AND EXPENSES OF WTAV TA JAMLY (T) int) Office (if applicable)  130 T. COUGAL AVE LU M.	"L" 59123	State of District (	if applicable)	
Mailing A	ddress (include city and zip code)	Telephone	No.		
E-Mail Ad	Idress	20	AN27	40	
Select A	ppropriate Box(es): CANDIDATE: 321 PAGE SEX BAG* 2013 POLPI			NDEDX 12 12	
	Report #1 — Due August 27, 2002         Office with a 2-year term       Period:       Jan. 5, 2001 — Aug. 22, 2002         Office with a 4-year term       Period:       Dec. 20, 1998 — Aug 22, 2002         Office with a 6-year term       Period:       Dec. 6, 1996 — Aug 22, 2002         BAGs only:       Period:       Dec. 7, 2000 – Aug 22, 2002	TO	Control of the Contro		
X	Report #2 Due — October 29, 2002 Period: Aug. 23, 2002 — Oct. 24, 2002			and the second	
	Report #3 Due — January 15, 2003  Period: Oct. 25, 2002 — Jan. 3, 2003  BAGs only: Period: Oct. 25, 2002 – Dec. 5, 2002  BALANCE	FOR OFF	ICE USE ONLY	generalises, groups	
	This figure should reflect the balance shown on your last Disposition of Unspent Contributions Report, or last Contributions & Expenses Report, if a	ny		· 	
	CONTRIBUTIONS SUMMARY  "Contribution" means a gift, loan, conveyance, deposit, payment, transformation of money or anything of value other than the services of a volunteer rece	sfer or distributior ved. (NRS 294A.	007)	•	
	1. Total amount of monetary contributions in excess of \$100				
2. Total amount of monetary contributions of \$100 or less					
Actual number of monetary contributions of \$100 or less					
	3. Interest and income earned on contributions, if any				
4. TOTAL AMOUNT OF ALL MONETARY CONTRIBUTIONS (add lines 1 through 3)					
	5. Total amount of In Kind Contributions		C		
	EXPENSES SUMMARY		~		
	<ul><li>6. Total amount of monetary expenses in excess of \$100</li><li>7. Total amount of monetary expenses of \$100 or less</li></ul>	S\$10	) 2 2	<u> </u>	
	<ul><li>8. Expense for filing fee</li><li>9. TOTAL AMOUNT OF ALL MONETARY EXPENSES (add lines 6 through 8)</li></ul>	· .			
	Remaining Balance (Subtract line 9 from 4)				
	10. Total amount of In Kind Expenses  AFFIRMATION re under penalty of periory that the foregoing is true and correct.	16 (	/ // // /O .	<del></del>	
Signatur	,	PAGE	OF	11	